ALLEGHENY COUNTY

JAIL OVERSIGHT BOARD MEETING

Thursday

June 4, 2026

Gold Room

4th Floor

Allegheny County Courthouse

436 Grant Street

Pittsburgh, Pennsylvania 15219

MEMBERS OF THE BOARD IN ATTENDANCE:

County Executive Sara Innamorato

President Judge Susan Evashavik-Dilucente

Judge Anthony DeLuca

Deputy Chief Richard Manning

Controller Amy Weise

Councilmember Bethany Hallam, for County Council President Michelle Naccarati-Chapkis

Man-E, Citizen Member

Robert Perkins, Citizen Member

Barbara Griffin, Citizen Member

JAIL ADMINISTRATION IN ATTENDANCE:

Warden Trevor Wingard

Chief Deputy Warden Lee Estock

Deputy Warden of Health Services Amy Shaw

Deputy Warden of Programs and Services Connie Clark

COMMUNITY CORRECTIONS PRESENTERS

RaShawna Bell - Passages to Recovery

Darren Hood - The Renewal Center

Steve Esswein - Electronic Monitoring

PUBLIC COMMENTS

Samantha Fitzgerald

Nathan Hoye

John Kenstowicz

Karen Burns

Diana Hull

Joe Shaughnessy

Sharon Bonavoglia

Ross Tedder

Drew Thomas

Tanisha Long

Tim Stephens

Jodi Lincoln

HP Jackson

Airi Tilley

Roy Blankenship

Cory Roma

Kasey Brown

Caelum Burns

Frank Filkosky

P R O C E E D I N G S

(4:00 o'clock p.m.)

CALL TO ORDER AND ATTENDANCE

JUDGE EVASHAVIK-DILUCENTE: I will call this meeting to order. We will take attendance.

MS. GRIFFIN: Barbara Griffin.

MS. WEISE: Amy Weise.

CHIEF DEPUTY MANNING: Richard Manning, Acting Sheriff.

JUDGE DELUCA: Anthony DeLuca.

JUDGE EVASHAVIK-DILUCENTE: Susan Evashavik.

MR. PERKINS: Rob Perkins.

JUDGE EVASHAVIK-DILUCENTE: Thank you.

Community Corrections Reports. Passages to Recovery.

COMMUNITY CORRECTIONS REPORTS

MS. BELL: Good evening, Board. I'm sorry. Good evening, Board. RaShawna Bell, B-E-L-L, Facility Manager at Passages to Recovery, reporting for the month of May.

We've had two escapes, zero revocations, and one medical transport. No

reported cases of COVID, zero fatal or non-fatal overdoses, zero use of force, no reports of HI or SI.

Our current count is 10 with 46 beds available.

In addition to reporting for the month of May, I would also like to read a letter to the Jail Oversight Board on behalf of our Executive Director, Carol Bendel -- Bender.

"To the members of the Jail Oversight Board, the purpose of this letter is to notify you that on May 14, 2026, the Board of Directors of Passages to Recovery voted to discontinue operations at the West Homestead Center facility, the organization's residential, clinically managed drug and alcohol treatment alternative housing facility.

As you know, alternative housing an inpatient treatment has historically been Passages' centerpiece service. After an analysis of options, Passages has reached the inescapable conclusion that residential services are no longer a financial viable business model for an organization of our size and capacity.

It should be noted that this

decision applies only to Passages residential services. Passages outpatient clinical treatment and Pare Recovery Community Services and its long-assisted divergent program will remain in operation and will continue to be unchanged.

Our immediate and primary concern is the safety and welfare of our current residents. Passages met with Connie Clark, Deputy Warden of Programs and Services, and April Reynolds, Residential Placement Manager, within days of the Board's decision. With their support and cooperation, we have developed a process and a timeline for safely discharging ten incarcerated residents. We want to ensure that they have a continuum of their care at Renewal.

We have conferred with the staff and Renewal and connection with this plan and expect to begin transfers of all residents next week. We have also presented a severance package to direct care staff at West Homestead that includes retention incentives to ensure coverage as needed and an option for temporary employment as we wind down operations.

Now that the staff has been notified, we are reaching out to all community

stakeholders including the advisory board. We want to stress that the organization is not closing. The decision to close West Homestead Center was difficult but necessary. This allows Passages to refocus and refocus its resources, more strategically address emergent service guides, and strengthen our community-based programming going forward.

Passages has been committed to serving justice-involved individuals and responding thoughtfully to the involved needs of the community for the last 50 years, and we have no plan on stopping now."

According to the letter, and I think she added this just for my behalf, "I am grateful to RaShawna, the Acting Residential Facility Manager at West Homestead, for reading this letter to you this evening. I ask that you contact our Executive Director directly if you have any questions or want to discuss this matter. I also have letters for everyone on the Board, if you guys would like, with her contact information.

Thank you for your understanding and support. Respectfully, Carol Bender,

Executive Director at Passages to Recovery."

That was a lot.

JUDGE EVASHAVIK-DILUCENTE: Thank you. Questions.

MS. BELL: You're welcome.

MS. GRIFFIN: Just a quick question. Are you aware of any special challenges or difficulties to the residents from transferring from your facility to Renewal? Like, for example, if they had jobs that were closer to your facility or anything like that?

MS. BELL: As of now, we have not had any -- we only have ten residents, so as of now, we have not ran into any issues with that transition.

Thank you. Would you guys like -- anybody like a copy of the letter? Yes? Okay.

JUDGE EVASHAVIK-DILUCENTE: Renewal Center.

MR. HOOD: Good afternoon, everyone. Darren Hood, H-O-O-D, Director of Reentry Services with Renewal, Incorporated.

Before I get into my report, I'd like to announce that 2026 is a big year for us. Renewal is proud to celebrate its 50th

anniversary year. Since our incorporation on December 8, 1976, we have remained committed to serving individuals involved in the criminal justice system that is pursuing recovery from substance use and mental health disorders, and individuals working towards successful reintegration into the community. Throughout the last five decades, Renewal's dedicated staff have worked with the courts, various jurisdictions, and community organizations to provide accountability, recovery support, and essential services that empower individuals to build safer, healthier, and more productive lives.

As we celebrate this milestone, we reflect on the thousands of individuals and families impacted by these partnerships and remain committed to advancing our admission for many more years to come.

All right. So we currently have 86 county work-release males, and 19 county males in our drug and alcohol program. There are 9 county work-release females, and 5 county females in our drug and alcohol treatment program. Total county males is 105. Total county females is 14. Total contracted beds filled is 119. Currently,

Renewal has 61 empty contracted beds.

Releases for the month of May, we had 82 reentrants exit the program, 52 successful, 30 unsuccessful, 16 escapes, 14 program revocations, some pulled by the courts, and others returned for behavioral issues.

We had zero deaths, one non-fatal overdose. Renewal staff responded promptly and precisely until advanced medical personnel arrived, administering Narcan, which saved that individual's life. We had zero use of force incidents, zero self-harm incidents, zero suicide attempts.

The number of emergency medical services were called to either building for county reentrants was five since the last Jail Oversight Board meeting. EMS were called for various health conditions.

Reentrants continue to participate in community service and various human service organizations within the Pittsburgh area. No major projects have occurred since the NFL Draft and the Pittsburgh Marathon.

I'm also excited to announce Renewal, Inc.'s 28-bed licensed recovery house,

Joey's Place, will open June 15, 2026, and is now accepting referrals. Joey's Place provides a sober and supportive living environment for individuals recovering from substance use disorder. It is located in the same building as Pathways to Care and Recovery at 326 Third Avenue, Pittsburgh, PA.

Designed with compassion and purpose, Joey's Place provides up to five months of housing in a structured, supportive environment where individuals can focus on healing, rebuilding their lives, and strengthening their recovery journey. As an essential part of Renewal's continuum of care, Joey's Place staff will work closely with each resident as they take meaningful steps towards lasting recovery, stability, and independence. Joey's Place offers modern double-occupancy living spaces for up to 28 adult men, ages 18 and older. Residents are welcomed into a supportive environment where everyone plays an active role in caring for the house.

Through shared responsibilities, cooperation, and weekly house meetings, residents build connection, accountability and a sense of

belonging as they move forward in their recovery.

The program also provides three meals, daily breakfast, lunch and dinner. For eligibility program requirements, general information and the link for the referral page, please go to Joey'splace@RenewalInc.com or call (412) 325-9374. Again, go to Joey'splace@RenewalInc.com or call (412) 325-9374. We will provide live brochures at the next meeting and can send out online brochures to anyone wanting to know more.

And as stated earlier, Renewal is currently working with Passages to Recovery to obtain information on cases being transferred to Renewal on June 9th and June 10th. We do not have a definitive number of transfers currently.

Any questions?

JUDGE EVASHAVIK-DILUCENTE: Beth -- Ms. Hallam?

MS. HALLAM: Thanks. First of all, I love Pathways. I know that's your guys' thing. I love it. I send people there all the time. I personally drive people there. I will take them in and get settled. The staff is incredible. They are so helpful. So this sounds like it's

going to work in coordination with them, this Joey's Place, so I'm really, really excited about that.

My one question is about who is eligible for Joey's Place. Is it intended to be like a step-down from Renewal, or will people go from jail to somewhere like Joey's Place, or can people come from the street?

MR. HOOD: All three.

MS. HALLAM: All of them. Awesome. Thank you very, very much. Yeah.

But also, please tell Pathways how much I adore them. 24/7, somebody needs treatment, you can just show up there with nothing. They will let you stay there until they find you a bed, and they do all the work calling around to get you a bed. It's like incredible. So thank you very much.

MR. HOOD: I'll pass that message on to the awesome staff at Pathways.

MS. HALLAM: Please do.

JUDGE EVASHAVIK-DILUCENTE: Anybody else?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Thank

you.

MR. HOOD: Thank you.

JUDGE EVASHAVIK-DILUCENTE: Electronic Monitoring.

MR. ESSWEIN: Good afternoon, Board. Steve Esswein for the Probation Office.

So for this reporting period, we have 646 individuals enrolled in the program. Of that, 97 completed successfully, and 7 were returned for violations.

Any questions?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Thank you.

No Board actions, so no Public Comment on Board Actions.

REVIEW OF THE MEETING MINUTES FOR MAY 7, 2026

JUDGE EVASHAVIK-DILUCENTE: Do I have a Motion to approve the meeting minutes of May 7, 2026?

MS. HALLAM: So moved.

JUDGE EVASHAVIK-DILUCENTE: Second?

MS. INNAMORATO: Second.

JUDGE EVASHAVIK-DILUCENTE: All in favor?

(Chorus of ayes.)

JUDGE EVASHAVIK-DILUCENTE: Any opposed?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Motion passes.

OLD BUSINESS

JUDGE EVASHAVIK-DILUCENTE: Old Business, updates from Incarceree Welfare. Any updates?

MS. HALLAM: Nothing.

JUDGE EVASHAVIK-DILUCENTE: Employee Welfare, I will update just to confirm that the phone room for the employees is completed and operational and being heavily used.

The gym for the employees is started, and it should be completed within a couple of weeks.

And the Healing for Heroes, the Warden is in communication with the manager regarding the institution of that program. I also spoke with DHS, who is going to see if they can find funding for that program, but discussions are continuing. And money and approval is needed, but it seems that it's

promising. Is that accurate, Warden?

WARDEN WINGARD: Yes, Your Honor.

JUDGE EVASHAVIK-DILUCENTE: Okay. That's all I have. Do you have anything, Employee Welfare?

MR. PERKINS: No.

JUDGE EVASHAVIK-DILUCENTE: Health Services Advisory Committee?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Okay. Lockdown and Use of Force?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Okay. New Business.

MS. HALLAM: Just one second. Yeah, I just want to object on the record to Chief Deputy Manning's attendance at this meeting. He is an illegal designee against the statute, and I just want to get that in the record. He can attend in the audience like everyone else, but he can't sit up here and participate as if he's the Sheriff.

Thank you.

CHIEF DEPUTY MANNING: Your Honor, may I respond to that, please?

JUDGE EVASHAVIK-DILUCENTE:

Certainly.

CHIEF DEPUTY MANNING: I understand that there may be differing views on who may participate in a Board Member's absence. However, I believe it is important to distinguish between a designee and the role that I'm serving here.

Some members of this Board participate through an expressed statutory designee provision. My attendance today is based on a different legal authority. I am not here as a designee. I am serving pursuant to Pennsylvania law. It's Title 16, Pennsylvania Statutes 13703 provides that the Chief Deputy Sheriff has full power and authority to perform any duty incumbent upon the Sheriff with the same legal effect as if performed by the Sheriff in person when the Sheriff is temporarily unavailable. That statute does not grant limited authority or observer status. It grants the legal authority to perform the Sheriff's duties.

Last I checked, participation on this Board is one of the duties assigned to the Sheriff by law. When the Sheriff is temporarily

unavailable, the Chief Deputy is authorized to perform that duty, as is any other duty in the office. If the general assembly attended for the Sheriff's seat on this Board to remain vacant during a temporary absence, it could have said so. Instead, the law provides for continuity of our office through the Chief Deputy.

Sheriff Kraus made it clear the importance of this Board and our office's role in its work. Although he's temporarily unavailable, he asked that our office remain engaged, informed, and attentive to the issues before this Board. In accordance with the law and his statutory responsibilities, I am here to fulfill that role in his absence as the Acting Sheriff.

Most importantly, maintaining representation during a brief absence keeps our focus where it belongs, on the welfare of those incarcerated. The people we serve are better served by our attention to the issues before us than a debate over who occupies a seat when the law already provides that answer.

Please do whatever you need to do to research that. I have the law here for you. Would you like a copy?

MS. HALLAM: Judge, despite the Chief Deputy's very well-written speech, I object still and disagree with his interpretation of that statute.

JUDGE EVASHAVIK-DILUCENTE: Okay. The objection --

MS. HALLAM: Thank you.

JUDGE EVASHAVIK-DILUCENTE: -- and the responses are noted. Thank you, everybody.

Warden's Report.

WARDEN'S REPORT

WARDEN WINGARD: Good afternoon, Board. I'll be brief. I wanted to just mention that since we last met, unfortunately, we had a death in the facility. That is under investigation by the Allegheny County Police, and therefore, I will not comment on that as I won't comment on any investigations being handled by the ACPD.

Last Friday, we had 15 cadets graduate from the Academy, who are now out in the facility. We're working on recruiting for the next class. Hopefully, we'll have a robust class.

And I wanted to just pass on some

sad news. Within the last couple of days, we had two former corrections officers pass away. Officer Ruffalo passed away last week. He did 36 years at the facility, and he was -- he was well respected by everybody there.

And then Officer Shell passed away recently, who also worked at the facility. He also retired from the Pennsylvania Department of Corrections, so I wanted to pass that news on, sad news.

That's all I have at this point. Thank you.

I'll pass it on to -- oh, this is Amy Shaw. Holly -- Deputy Martin could not be here tonight, so Amy is filling in for Deputy Martin.

MS. HALLAM: I have some questions. Do you want me to ask them now?

JUDGE EVASHAVIK-DILUCENTE: Wait until the end, please.

DEPUTY ADMINISTRATOR SHAW: Thank you. Our substance use team has continued to evaluate and treat incarcerated patients in the month of May. Treatment includes all forms of medications, both oral and injectables and

counseling services.

For medications, 593 patients; for counseling, 89 groups were held and 244 patients participated, with 9 completing graduation. Some group topics are addiction, law, spirituality and forgiveness, coping skills, and relapse prevention. Goals of our substance use programming and services is to set this patient up for success during and after incarceration through medication, education, and connecting resources on release.

State hospital data, five patients were admitted and transferred to Torrance. None were admitted and transferred to Norristown. Nine patients were committed. One patient had their commitment rescinded, and 21 patients are awaiting admission, with the longest waiting since January 20, 2026.

Tier Data, Tier V, none. Tier IV, 22.

Mobile competency restoration team. This team is coming up on their one-year service and has been a pleasure working with this team. They're currently serving 111 clients; 69 are housed in the county jail, and 31 are in the

community. They were able to rescind no commitments this month.

Sick call requests, 38 medical, longest waiting 2 days, with 1,244 completed. Sick calls for mental health, the longest has been waiting 20 -- or 20, with the longest waiting 1 days, 472 completed. Dental sick calls, 8, with the longest waiting 2 days, 231 completed this month. And the psychiatrist had 506 sick calls, with the longest waiting 7 days, and 1042 completed.

25 folks were refused at Intake for various reasons encompassing instability to stay as a new arrest and cleared at the hospital.

That's the end of the report.

DEPUTY WARDEN CLARK: Good afternoon, Board. The Discharge and Release Center received a donation of 140 hygiene bags that are being provided to females when they release from the facility. The bags were a generous -- were generously donated by the Duquesne Women's Law Association.

The Foundation of Hope also provided the Discharge and Release Center with a donation of socks and sweatpants which will be

provided to individuals in need.

The average daily population of the jail, excluding alternative housing in May, was 1,678. This is a 5 percent decrease from May of 2025, which had an average daily population of 1,767, and a 2 percent decrease from April of this year, which had an average population of 1,712.

The Vocational Training Program averaged 361 participants per week in the month of May. There were 3,600 vocational training shifts, 1,986 educational programming classes, and 9 graduates from the Hope Program who received an incentive payment in the month of May.

The Tales Program had some exciting adoptions in May. Toby and Raj got a new home, and a new dog, Chloe, has joined the program.

For Educational Services, on May 28th the school held a commissary culinary competition where students were able to create dishes based on items from the commissary. The creativity displayed was impressive, and students were excited to show off their creations.

The jail held a high school

graduation ceremony yesterday for 10 graduates. Their families were able to attend, and they had a lunch celebration following the ceremony. A special thank you to County Executive Sara Innamorato for her attendance and remarks at that graduation ceremony.

The school held their end-of-year celebration yesterday as well. Loved ones were invited to come to tour the school, speak with teachers, and have lunch with the students. Summer school begins for students on June 26th.

This month, as we continue to have presentations on our Reentry Program and the services that are offered, I'd like to introduce Matt Dugan and James-Brian Byers from the Prison Society, who are here tonight to talk about the class that they do in the jail, which is Relationships, Building and Maintenance.

MR. DUGAN: Hello.

MS. HALLAM: Hi.

MR. DUGAN: Thank you, Deputy Warden Clark, Warden Wingard, Jail Oversight Board. Thank you for having us here today. I know many, many of you from my former role as Chief Public Defender. Some of you I know better

from less successful ventures in my life, but I'm very much honored to be here today in my new role as the Western Director for the Pennsylvania Prison Society.

So the Pennsylvania Prison Society is one of the oldest human rights organizations in the country. We are served with protecting the health, safety, and dignity of incarcerated people across this Commonwealth.

Many of you are probably familiar with the work that we do here in Allegheny County. We have had volunteers coming into this facility for a decade plus. My -- sort of my familiarity with the current role here is that it's actually working very well in Allegheny County. We're lucky to have a warden, and we're lucky to have staff that work with the Prison Society and do so more so than any facility really in the state. So we're lucky that we have a direct line of communication with the warden and his staff, and we're lucky that we've been invited inside your building to perform what we think are very valuable reentry services.

So many of you probably -- might not know that we have been in the jail for over a

year. We have a separate arm in addition to our prison monitoring and oversight board; we have a family and community support group that we work. We have an entire arm where we offer programming in the Reentry space. We offer this programming, these workshops in four SCIs in the state, two on the eastern side and two here on the western side. We're in SCI Fayette. We are in SCI Greene, and we are luckily in SCI -- SCI, we are luckily in Allegheny County Jail as well. We're coming up on our one-year anniversary.

I didn't design this program. I had no role in its curriculum. Folks in Philadelphia were really thoughtful about it, and it's really about building connections and learning about relationship building and skill building, such that when you are released, we'd like to see higher instances of success.

The reason it's so successful here in Allegheny County is because we have a very, very talented facilitator. JB has been in the basement of the jail for the better part of a year, three days a week, working with cohorts and successfully shepherding them through this curriculum.

And I'm proud to report that based on our most recent survey from DHS, and our results, that we were one of the -- we were one of the higher rated reentry programs in the jail. We're having huge amounts of success, and we're really excited about the relationship that we have with the Reentry folks, with the Allegheny County Jail, and the Department of Human Services. And we look forward to expanding services here in the future.

So to give you a better insight as to what we're actually doing down there day-to-day, I'm very excited to introduce to you JB Byers.

MR. BYERS: Good afternoon, Members of the Board and people watching at home. My name is James-Brian Byers, B-Y-E-R-S. I would like to give a special initial shout-out to Deputy Warden Clark as well as Amy Kroll of the Reentry Center in the Allegheny County Jail.

The reason that I do this work here -- also, as well as Warden Wingard. Please don't let me forget that.

The reason I do this work is that my background is that I am a licensed social

worker. I am also a returning citizen. I was released in 2015.

Since then, I made a promise to my parents and to my family that I would use my skills to create that which they did for me. I am not special. I am not smart, but I do work with people who are special and who are smart. And I want to tell you a little bit about this program.

So basically, it is built on relationships. What kept me from ever recidivating was the relationship with my father, Dr. Byers, and my mother, the other Dr. Byers, and my church, and the people who cared about me, and the parole and probation officers who told me, no, man, just do right; the professional health monitoring program that said you can have your license back, but do right. And those relationships are truly the foundation of what we are trying to deliver.

So the curriculum is basically stated on -- for women, 5 sessions, 5 weeks, and for men 6 weeks of 12 sessions. We do things like guided discussion, reflection exercises, practical communication tools -- which, as a

social worker and a therapist, I love -- goal setting, and honestly, real-life reentry scenarios.

What I value most about what was created is that this is very practical and very human. It avoids talking at participants and instead invites them to reflect on how they communicate, how trauma affects them, how they handle conflict, how they rebuild trust, and how they create sustainable support systems.

Now, I had a piece of help in writing that. When I'm facilitating inside the Allegheny County Jail as well as the SCIs, I don't say how they communicate, I say how "we" communicate, how trauma effects "us," how we handle conflict, how "we" rebuild trust, and how "we" create sustainable support systems, because see, I am one bad decision away from being a member of Warden Wingard's care.

Thankfully, tonight I'm going to go to my AA meeting. Last night was my anniversary, 9 years plus 1.

(Applause.)

MR. BYERS: Thank you. But the curriculum is really further broken down into the

three types of relationships: Personal relationships, transactional relationships, and strategic relationships. This distinction is important because those of us who return home are going to need to navigate family dynamics, parole supervision, employers, recovery communities, mentors, and social supports all at the same time.

Let me tell you from experience that was overwhelming, but it's doable. The therapist in me loves spending time talking about communication and emotional intelligence. We discuss active listening, self-awareness, anger management, empathy, negotiation and conflict resolution. Why I think this is important to discuss and lay out for you in these ways is that this is based on real-life scenarios and not abstract theory that I learned in graduate school.

We use real-life things such as conflict with an employer, tension with family after release, difficulty in accepting support. I am a man. I'm a proud black man. It's hard sometimes for me to say I need your help when you look different than me.

These are real situations that people actually encounter during reentry. We talk about trauma and mental health, and I'll tell you that this is what we discussed this morning at the Allegheny County Jail, and all the participants know that, oh, okay. Here he goes. He's on his therapist mode now, right?

And we really, really talk about chronic trauma, instability, addiction, grief, violence, and prolonged stress. We talked about trauma responses, emotional regulation, coping strategies, and the hidden impact that stress has on physical and mental health. And we do all this without one bit of shame.

I go in there every single day, beginning of class and say, I am no different than you, not one bit. The only thing that's different for me is that Warden Wingard lets me leave. My hope is that one day you will come take my job or sit here right here next to me and do this.

So we talk about motivation and setbacks, because, see, I am here today not because of my resilience, but my mother's. Thank you, Mom. We reframe setbacks as growth rather

than proof of failure. That is incredibly important in reentry work because progress, human progress is not linear. I have good days. I have bad days. I still have good days. I still have bad days. We talk about acknowledging setbacks honestly. We avoid blame. We regroup, and we continue moving forward.

The overall guide is that relationships, health relationships, and I really need to stress health relationships, they're based on trust, respect, safety, my personal favorite word boundaries, and commitment.

Research that has been conducted on this program and real-world experience show that people are more likely to succeed after incarceration when they have stable support, emotional connection, accountability, and a sense of belonging.

When I came home, Allegheny County did not throw me away. The Pennsylvania Prison Society said come on, let's do this. Why this works is I -- this is inherently strength based. A lot of times, I mean, in the academic research curriculum, you hear things about strength space. This is it. This is it. Instead of asking about

your past mistakes, I ask, well, okay, I'm not worried about that, but what are you going to do next? What kind of life do you want? What relationships matter to you? And what actions move you closer to stability and physical health? Practical, reflective and empowering rather than being punitive.

And I have to say again that Ms. Kroll and her reentry staff have been absolutely instrumental in being an effective partner in this. Deputy Warden Clark has even said to me keep going, talk to them, have those conversations. You see the proof, if I may, the proof is that building connections -- and some of you might know on this Board -- I work for one of you -- is that building connections matters.

So to close, I would say that building connections recognizes something extraordinarily important. Reentry work is not a logistical process. It is also an emotional and relational process. And personally, I think this curriculum offers a thoughtful and accessible framework for doing exactly that. That is borne out by the research that the Department of Human Services has shown to us that -- with the

question that was asked, I feel that my facilitator relates to me.

The only thing that they say that they cannot relate to me on is, on week one, I say to them, go birds. I say that because I'm a man. I'm a father. I'm a husband. I'm a member of Allegheny County, and I'm proud to work for the Pennsylvania Prison Society with Deputy Warden Clark, Warden Wingard, and Ms. Kroll.

Thank you.

JUDGE EVASHAVIK-DILUCENTE: Thank you for your very important work. And congratulations to you, sir. Nine years is a fantastic accomplishment. Congratulations.

MR. BYERS: Thank you, ma'am.

JUDGE EVASHAVIK-DILUCENTE: Wait. Are you all done?

DEPUTY WARDEN CLARK: Yes, Your Honor.

MS. HALLAM: Oh, are we doing total questions? I was just going to ask questions of them. Are you in like "question" questions?

JUDGE EVASHAVIK-DILUCENTE: Go ahead.

MS. HALLAM: Go ahead. I was going to ask a bunch of really hard questions just to be a jag, but I'm not -- I've decided against it, you know, for the sake of everyone else. And so I really only have one question, which is I think that the work that yinz do is awesome.

And the only thing that I would like to advocate for is in the Prison Society's work in the jail, if you ever come across like policy changes, like things that you think we could be a thought partner on, please reach out. Like if we could build some kind of pipeline for that to happen for the Prison Society volunteers, or you guys as the leadership, to come to us as the Board and be like, hey, here's this thing that we've been seeing. We'd love if you guys could figure this out.

MR. BYERS: Yeah, that's fantastic. I think there's enormous opportunity for our organization to partner with the Jail Oversight Board.

MS. HALLAM: I think so too.

MR. BYERS: 100 percent.

MS. HALLAM: Yeah. But thank you for everything that you do. And again,

congratulations on nine years. That's incredible.

MR. BYERS: Thank you.

JUDGE EVASHAVIK-DILUCENTE: Thank you.

MR. BYERS: Thank you all.

DEPUTY WARDEN CLARK: That concludes our report, Your Honor.

JUDGE EVASHAVIK-DILUCENTE: Questions. Ms. Hallam.

MS. HALLAM: Okay. Thank you so much, Judge. Okay. Where to start. The first question is I know you said you're not talking about this, Warden, and I'm really not asking you to talk about it, I swear. But is there some kind of timeline we can get as to when any -- the investigation at the jail will conclude?

And if you can't tell me that, can you at least tell me will the Jail Oversight Board get a briefing when that concludes about the death in the jail?

WARDEN WINGARD: I have no timeline, but I can imagine after it's concluded we will have -- we will have an update.

MS. HALLAM: Cool. I appreciate --

I would really, really appreciate that a lot.

Okay. Next question is you mentioned about the counseling component about the -- with the MOUD, and I was just wondering, because I know we've heard, you know, complaints over time about the lack of actual privacy for counseling sessions and it sounds like yinz are doing a lot of them, so I'm just wondering what kind of space those MOUD counseling sessions take place in and is it a private space, or is this like a counselor is coming to your door or on the pod?

DEPUTY ADMINISTRATOR SHAW: We do -- we do several different things as far as this goes. We have group counseling that they do, but they also have individual counseling that they do. We have a lot of different spaces that we're working on. We actually had a meeting about that today. We're working on getting private pods for the therapists to work out of --

MS. HALLAM: Cool.

DEPUTY ADMINISTRATOR SHAW: -- and some of the other people to work out of. We have been using level clinics for folks to work in, and we have other spaces that we work with them

to use. So they do have private settings, so they're not in the middle of the pod trying to talk to somebody about these kind of issues.

MS. HALLAM: Okay. Awesome. So it's like a work in progress?

DEPUTY ADMINISTRATOR SHAW: Yes. We're continuously looking for new spaces.

MS. HALLAM: Awesome. Thank you very, very much about that.

Next question is I know we have had numerous meetings about the Hospital Notification Policy, and I was just wondering if we could talk about, like, what is the next step? I know that this month is supposed to be the month where we -- it's June, right? Yeah, it's June. This month is supposed to be the month where we get like a, hey, here you guys go. We didn't get it even though we were told that we were going to have it before June, and we didn't need to vote on that Motion, but I digress.

But I'm just wondering, like at what point you guys think your draft will be final to come to us for any amendments and approval?

WARDEN WINGARD: Sure. Let me go

back to the last question. The pods that Ms. Shaw mentioned, I don't want to misconstrue that those are housing unit pods that we're using. Those are pods that we're looking to pilot, maybe where ones that are privacy pods that we're going to place in a big area.

MS. HALLAM: Good.

WARDEN WINGARD: I just wanted to clarify -- clarify that.

MS. HALLAM: Like phone booth type of things? Are those like -- they're working --

WARDEN WINGARD: They're better than that. More privacy, yes. Something like that.

MS. HALLAM: Yeah. Cool.

WARDEN WINGARD: So when we have those in place, take a look on one of your tours.

So, I can send you -- I can send you the last version of what you had. I can send you the newest version, and I can show you the comparisons between the two. There are not many. There are not many differences between the last version that you have and the current version.

I can send those in an e-mail to anybody on the Board that wants them this

evening.

MS. HALLAM: Okay. How recent are those changes, because I know Member Perkins and I met with the leadership about some thoughts we had, and I was just wondering are any of those being included, or should we operate as in the thing you send us tonight is what you guys are sending us, and you're waiting on us?

WARDEN WINGARD: I think what we send you, we can still have a discussion about. I talked to one of our medical doctors today about some comments she wants to talk about with us. But we just had that conversation later this afternoon.

I'm not sure if what I send you this evening or tomorrow morning is going to be much different than what you had before. I don't think we made many revisions since your meeting with the leadership team on Monday, I believe that was.

MS. HALLAM: Sunday.

WARDEN WINGARD: But again, I can show you the last version, the newest version, and I can -- we can show you a separate page that shows you the differences between the two.

MS. HALLAM: Okay. I mean, I kind of have done that. I would still like you to send, sure. But what I'm wondering is are -- should we expect any other versions to come from you guys, or should we take this thing you're going to send us tonight and run with it for any changes that we want?

WARDEN WINGARD: I'd like to have one more discussion with the --

MS. HALLAM: Okay.

WARDEN WINGARD: -- the -- at least one of the medical doctors in the facility before that, before I would say that would be our final version.

MS. HALLAM: Okay. And when do you think that will be?

WARDEN WINGARD: I'll probably be talking to her more this week, tomorrow.

MS. HALLAM: Okay. This week. Cool. Awesome. I appreciate that a lot.

Next question is about -- oh, I really, really, really appreciate the data point about how many people the jail refuses for medical reasons. Just know that I am so glad that that happens, and now you're being diligent

with not admitting people to the facility who shouldn't be there.

I just want to know if you're also tracking how many of those people come to the jail after they go to the hospital. Like, are all 25, did they all then go to the hospital, get medically cleared, and come back to the jail, or when you refused them, do half of them come back, do none of them?

DEPUTY ADMINISTRATOR SHAW: Are you only speaking about the ones that we refuse to go to the hospital or --

MS. HALLAM: Correct.

DEPUTY ADMINISTRATOR SHAW: -- are you speaking about the ones that get medically cleared, the arresting officer takes them to the hospital to get medically cleared before they come to us?

MS. HALLAM: I'm more talking about the 25 number, of the people that you refused.

DEPUTY ADMINISTRATOR SHAW: That actually come back that same day? I'm just trying to clarify. I don't have the answer to this, but I want to make sure I have all the information with regard --

MS. HALLAM: Well, I guess make sure I'm asking the question right first, too. So my understanding is when you say the jail refused 25 people for medical reasons, to me, that means the police showed up at the jail, tried to have somebody admitted through Intake, and the jail said this person is not well, needs to go to the hospital? Is that correct?

DEPUTY ADMINISTRATOR SHAW: Right.

MS. HALLAM: Okay. So what I'm wondering is out of the people that that happens where the jail is the first place they go, yinz say no, and they go to the hospital, how many of those people then, after they go to the hospital, come back to the jail?

DEPUTY ADMINISTRATOR SHAW: That same day? Like immediately come back?

MS. HALLAM: No, sure. Just like they don't go home first. They don't go home first. So whether it's they come back the same day after being cleared, or they're in the hospital for five weeks and -- do they then come back, just in total, how many of those people come straight from the hospital back to jail?

DEPUTY ADMINISTRATOR SHAW: I will

get that answer for you.

MS. HALLAM: Yeah. Thank you. I -- it would be really helpful. And again, really appreciate that that's even happening. I can tell you that three years ago, that never happened. We just kind of took people.

But anyway, next -- I just have a couple more. Tablet update from Connie. Is there a new tablet contract?

DEPUTY WARDEN CLARK: We are awaiting signatures on the contract.

MS. HALLAM: From like the county side or from like company side?

DEPUTY WARDEN CLARK: From the county side.

MS. HALLAM: County side. Okay. Cool. Can we see what is awaiting signature?

DEPUTY WARDEN CLARK: You can see it once it's signed, which will hopefully be within the next week or so.

MS. HALLAM: Which will mean that it's just totally done and executed and there's nothing that can happen?

DEPUTY WARDEN CLARK: Yeah.

MS. HALLAM: Yeah. I don't like

that, but I would still take it. But yeah, I don't like that.

Next thing is -- oh, I know in the past the jail has done exit interviews specifically with higher-ranking positions of people who leave, whether it's medical or, you know, corrections staff. I recently spoke with a group of mental health nurse practitioners that were, you know, as they called it being forced out of the jail for various reasons, and I'm just wondering if nurse practitioners is a position that you typically do exit interviews for, or if you ever make that an exception for, for example, a group of people that are all leaving for a common reason? I don't know who to ask that question to.

WARDEN WINGARD: Well, you can ask me. I'm not aware of that situation, but we have done exit interviews with -- it doesn't matter the rank.

MS. HALLAM: Okay.

WARDEN WINGARD: We will talk to folks if they want to talk at the facility, over coffee, whatever the situation. We will go and meet with people. Over the phone. I know people

on the Board have done that.

MS. HALLAM: Yeah.

WARDEN WINGARD: So we'll look into that specific situation and see if they're willing to talk to us. I would imagine those folks were not county employees. They were providers.

MS. HALLAM: Correct.

WARDEN WINGARD: Right.

MS. HALLAM: Yeah.

WARDEN WINGARD: They were from --

MS. HALLAM: Yeah, I would be happy to share details with you about it after the meeting. I just don't, you know, want to give them in the meeting. But I just want to -- I guess my last question then is who should they reach out to about it, like if that's something that they want to do? Is there a specific contact person? Is it you?

DEPUTY ADMINISTRATOR SHAW: It would be me or Deputy Martin.

MS. HALLAM: Okay. Thank you.

And then last, I just want -- oh, before I move on to a couple of questions from the Public Comments, Man-E and I went and visited

with a 15-year-old girl who was incarcerated in the jail recently and checked on her. And while she was in good spirits and reported being treated well by the staff, I was just a little concerned about the fact that there isn't a housing pod for juvenile girls. And so she was in a medical unit where -- she was kind of just locked in her cell by herself almost all day. And I was just wondering if there is any traction towards a change in policy for what happens when a young girl is in the jail as opposed to the whole pod we have for young males?

WARDEN WINGARD: That's something we can discuss. That's the first case that I'm aware of there in the last 16 months or so. It's -- as you know, it's difficult to dedicate a 90-bed pod for 1 person.

MS. HALLAM: Yeah.

WARDEN WINGARD: But certainly, it's something we can have a discussion about to maybe compromise between a whole housing unit and where that particular individual was.

MS. HALLAM: Okay. Yeah. Cool. Just -- yeah, I don't expect her to be on a 90-person pod by herself, but just to kind of

better facilitate recreation and, you know, less feeling of just being locked in all the time.

She did report going to school a lot, and that is also a great improvement over the past few years. But yeah, something we can work on.

Okay. And then just a couple things from Public Comments that were submitted online. One of the comments asked, and this is something that we've talked about I think in the past, for representatives from Family Division to come for folks who are incarcerated who are experiencing, whether it's custody battles, or CYF situations, or just anything that the Family Division is responsible for, and I was wondering if that's something that, you know, any of your previous places that anybody has worked you guys facilitated?

I know in the past we've talked about people having access to resources, for like when an eviction is filed against them, when they're in court, right? I know the jail takes people to criminal court cases when they're incarcerated, but not to civil cases. And so I guess I'm just wondering, one, is that something

we can start doing? What kind of resources would that take to give people access to Family Court proceedings and Family Court support while they're incarcerated.

DEPUTY WARDEN CLARK: That would be a discussion we'd have to have with Family Court just to --

MS. HALLAM: With courts.

DEPUTY WARDEN CLARK: -- see what they could facilitate and how.

MS. HALLAM: Judge Evashavik maybe.

JUDGE EVASHAVIK-DILUCENTE: Yeah, we can --

MS. HALLAM: We can talk about that? Okay. That would be awesome. Thank you.

And then also while we're at it, not that this is from a Public Comment, but people who are facing eviction while they're incarcerated, I think would be really useful to facilitate a way, even if it's remotely, that they can participate in their landlord/tenant hearings while they're incarcerated.

Another comment talks about the time it takes for someone to get released after their hold is lifted. This one specifically

about bond being paid and still taking 24 hours for someone to be released after that. I know we've talked about that in the past. I'm wondering if there's any progress on speeding that up. I've seen people like four days in the jail after all their holds were cleared. And I know medication is often a rationale, but even three days for medication is wild.

DEPUTY WARDEN CLARK: So it generally does not take three days. It's at the most -- I think it's in our report this month -- I can look and tell you the average timeline, but -- 23 hours according to the chief is our average release time. So 72 hours is definitely not the norm. So, you know, it is important to us to release people responsibly. And part of that is ensuring that they have medication, that they go through our Discharge and Release Center, that they have the support that they need in order to successfully release.

So yes, medication is ordered. We are having conversations on how to expedite that process so that we can get their medication in more timely. Even if it's a few hours, that's a few less hours that that person has to be in the

jail. Those conversations are ongoing, and we're looking at many different avenues to try to shave any time off of that release time.

MS. HALLAM: Yeah. Because it's the average is 23, and that's like almost a day. I think it's probably pretty common that it's multiple days sometimes. And again, just very recently, I was talking with I forget who at the jail about somebody who was there for three days post their hold being lifted. So it does happen.

And then very last question from the Public Comments is about body cameras, which I am a big fan of, and I'm wondering if -- I know we've talked about in the past -- if there's been any movement on the implementation of body cameras on staff at the jail?

WARDEN WINGARD: Sure. We had a demonstration from a company who provides body cameras to other organizations in the area, and we are looking and moving forward with at least a pilot for that. We're working through, you know, those discussions. But we did have -- we did have that company in, and I'd say we're closer. But it will start out -- it will start out on a very, very small scale with a pilot to begin.

MS. HALLAM: Okay. Cool. I am so down for that, so if there's anything that the Board can do to help, or even Bethany can do to help, let me know.

That's all I have, Judge. Thanks.

JUDGE EVASHAVIK-DILUCENTE: Okay. Anybody else? Man-E.

MAN-E: All right. Good evening, everybody. My first question is going off of a Public Comment. It's basically complaining about the facilities in the jail. And, of course, we've had conversations about the facilities in the past, especially about the air quality.

But last month, we talked about the door being fixed. You said that it was ordered. Any update on that?

CHIEF DEPUTY WARDEN ESTOCK: We are still waiting on that glass.

MAN-E: Are you still waiting on the delivery?

CHIEF DEPUTY WARDEN ESTOCK: Yeah. The delivery is -- I want to say the ballistic glass. It is the glass.

MAN-E: All right. I gotcha. Whenever like a repair or a service is put in for

the facility, what's like the average wait time for anything?

MS. HALLAM: Years.

CHIEF DEPUTY WARDEN ESTOCK: I don't know. Actually, they're -- Facility is pretty responsive to the things that are a priority to the jail. Obviously, there's a lot of different areas that are tough to keep up on, maintenance, upkeep, the wear and tear of the building, and stuff like that, but they've done, I'd say, a marked improvement on responsive to our issues down there.

I can't give you an average time. It's depending on what the issue is.

MAN-E: I gotcha. Is air quality and water quality a priority for the jail?

CHIEF DEPUTY WARDEN ESTOCK: Yes.

MAN-E: All right. I gotcha. How often are those at least addressed or looked at? The reason I ask because this person in the Comment specifically talked about water. People who are incarcerated have to drink from the spigot, is that -- that's correct?

CHIEF DEPUTY WARDEN ESTOCK: Uh-huh.

MAN-E: So the quality of the water and, of course, the quality of the air, the recirculated air that everybody has to breathe, it's something that's extremely important, I think, so how often are those at least monitored or addressed in one way or another?

CHIEF DEPUTY WARDEN ESTOCK: I'm going to have to get back to you on that, but I -- I'm almost positive the water is tested monthly.

MAN-E: Okay.

CHIEF DEPUTY WARDEN ESTOCK: But it might even be more often than that. So let me get back to you on both of those.

MAN-E: Okay. I appreciate that.

All right. My second question is related to a report that we received. It is from the mother of an incarcerated person who said that she -- or that her son, along with ten others, were assaulted while they were praying an Islamic prayer. Of course, you know, when we get into specifics of it, we may have to ask -- we do have a date and a time whenever that took place. We do have a name as well that we can speak to you about, but my question more broadly is about

religious services in general.

That used to be a part of the report. I don't see it anymore. Are there religious services held in the jail? If so, how are they conducted?

DEPUTY WARDEN CLARK: There are numerous religious services that are held in the jail. Some of those are done through the chapel. Some of those are done on video visitation. Some of those are done on individual housing units. It just depends on what the service is.

Specifically to Muslim services, the Foundation of Hope, as you know, we contract with four chaplaincy services, so they've been working on getting in Imam. I believe they hired a part-time Imam they're going to bring on. They are also in the process of hiring a new Chaplaincy director and looking forward to that person to come on to strengthen not just Muslim services, but all of the religious services in the jail.

MAN-E: All right. I gotcha. Do you know where those services take place? Is there a designated area, or do those services take place on the pods?

DEPUTY WARDEN CLARK: Muslim services currently happen in the pod because we don't have an Imam coming in. But once we do, we'll look at a more centralized place to have those services.

MAN-E: Okay. So on the pod, is it run by the Islamic incarcerated people themselves?

DEPUTY WARDEN CLARK: Yes, sir.

MAN-E: Okay. And do you have any record of any type of issues dealing with Islamic prayer?

DEPUTY WARDEN CLARK: I personally do not, no.

MAN-E: Okay. I gotcha. We'll talk about it after the meeting.

WARDEN WINGARD: If you could send us the date and time of that --

MAN-E: Sure.

WARDEN WINGARD: -- incident, we'll look into it.

MAN-E: Appreciate that. Thank you.

My last question is related, you know, to the incident, the unfortunate death that

took place. I know there's not a lot that we can talk about while that investigation is ongoing. I do want to give a shout out to the many community members, many of -- many of which I'm sure will be asking questions about this.

My only question about this is not related to the investigation, but to something that may have happened afterwards or may not have happened, specifically, people who were in need of some mental health care and treatment as a result of this incident. We had quite a few reports from folks that said that they requested some mental health treatment. They didn't get any. There was one person in particular who said that after multiple requests, the only thing he got was an activities packet.

So my question is what was the mental health response like, and for somebody who requests mental health treatment in the jail, you know, what's the practice?

DEPUTY ADMINISTRATOR SHAW: I know that the evening after the incident that the mental health specialist and the mental health director were on that pod seeing people. And I know that the next day they went back.

I also know that Chaplaincy had been called and went there, and I know that we had received requests from the unit managers and individual requests through our sick call process for people to be seen. And I know that those folks were seen.

If somebody needs to be seen, if they put in a sick call request or let the officer on the pod know, or let the unit manager know when they make rounds, then we make sure that they are seen, generally that day by one of the mental health specialists.

MAN-E: Okay. And once somebody is seen, what is that -- what does that consist of? Is that like a one-on-one conversation? Is that just somebody coming to the door and speaking through the door? Like, how does that work?

DEPUTY ADMINISTRATOR SHAW: It depends on the situation. They go -- the mental health specialist will go see them. If they feel that that person needs, like, psychiatry or something like that, they'll make that call, or they'll let them know in realtime that, hey, this person really needs to be seen now, or if they need to be moved to a mental health pod, or

whatever. But they will sit down and talk to them and kind of try to work through the thing. And if they need referred to therapy or something like that, they'll also make that referral.

MAN-E: All right. Whenever they sit and talk to them, typically, what's that process like? Is it like just an intake, just touching base, seeing how they're doing, or is that like an actual one-on-one engaging conversation?

DEPUTY ADMINISTRATOR SHAW: It's -- it's an initial evaluation. Then if there needs to be more conversation, then they'll do that. A lot of times we go on these sick calls, the person won't remember that they even put in a sick call, or be like, well, I don't need it anymore or whatever. So if that's the case, then they just kind of move on. But if they do need to pull them out and have a private conversation with them, they'll do that.

MAN-E: All right. So they can put in a mental health request the same way you put in a regular sick call?

DEPUTY ADMINISTRATOR SHAW: Right. Right.

MAN-E: Do you know what the response time is like on that?

DEPUTY ADMINISTRATOR SHAW: It's usually within 24 hours.

MAN-E: Within 24 hours.

DEPUTY WARDEN MARTIN: Uh-huh.

MAN-E: Okay. My -- actually, my last question I forgot about is about the Discharge and Release Center. Of course, I know we table outside of the jail, and most of the folks that we've been seeing really over the past year, you know, have had good things to say about the Discharge and Release Center. Can you just remind us of the hours of operation? Is it every day?

DEPUTY WARDEN CLARK: It is Monday through Friday from 8 a.m. to 8 p.m., and Saturdays 8 a.m. to 4 p.m. They are not open on Sundays.

MAN-E: Okay. Do people still get released on Sundays?

DEPUTY WARDEN CLARK: Very few, but yes.

MAN-E: Okay. Is there any type of resources offered to those folks --

DEPUTY WARDEN CLARK: Yes.

MAN-E: -- even like, you know --

DEPUTY WARDEN CLARK: Yes. So they will still be offered -- they're going to get their medication. If they need clothing, they're going to get clothing. If they need bus tickets, they'll still get bus tickets.

MAN-E: Okay. I gotcha. And the cashier is operational during those hours as well, right?

DEPUTY WARDEN CLARK: The cashier has the same operating hours as the Discharge and Release Center.

MAN-E: Okay. That's it for now. Thank you.

JUDGE EVASHAVIK-DILUCENTE: Mr. Perkins.

MR. PERKINS: I had a few questions about mental health-related issues. I'm not sure if you'll know the answers or not, but maybe you can get back to us. So there's a lot of numbers discussed, but as far as the wait times for people who have been determined to be incompetent, and they're -- how long they have to wait to go to Torrance State Hospital or

wherever, did you say some people have been waiting since January?

DEPUTY ADMINISTRATOR SHAW: Yes.

MR. PERKINS: Have we gone backwards in that area, because it seems like we're shortening length times?

DEPUTY ADMINISTRATOR SHAW: It seems to fluctuate, especially depending on the time of the year. There are certain times of the year that we do seem to see more mental health issues come into the jail. And the acuteness of the people that we've been getting, especially in the last couple of years since I've been there, has definitely increased. So the Torrance wait times have definitely gone up from what they were maybe two or three years ago. So I don't know if that answers your question or not.

MR. PERKINS: Okay. So I know one of the ideas was to send people to Norristown State Hospital.

DEPUTY ADMINISTRATOR SHAW: Right.

MR. PERKINS: And I saw we didn't send anyone last month.

DEPUTY ADMINISTRATOR SHAW: Right.

MR. PERKINS: Is there no available

beds there?

DEPUTY ADMINISTRATOR SHAW: It -- I don't even know if we made referrals there. I can't answer that, but I can get you that answer.

MR. PERKINS: Okay. And last question, with respect to the DTU, and we've discussed the eventual plans to move people. Do we have a timeline or an idea of when that's going to happen yet?

CHIEF DEPUTY WARDEN ESTOCK: We have a couple security issues we have up there structurally. We're working on it. There's a gap between the cells that needs to be filled in with angle irons, so we have Facilities Maintenance scheduled to come in there and then install angle iron on each one of those cells. Once that's completed, paint crew and we should be able to make the move.

MR. PERKINS: Do you have an estimated timeline?

CHIEF DEPUTY WARDEN ESTOCK: I would say probably a month. I'm hoping by the next JOB meeting.

MR. PERKINS: Okay. Thank you.

JUDGE EVASHAVIK-DILUCENTE: Anybody

else?

(No response.)

PUBLIC COMMENT

JUDGE EVASHAVIK-DILUCENTE: Okay. Public Comment. Alini Berkovic?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Samantha Fitzgerald.

MX. FITZGERALD: Hello. My name is Samantha. I'm from Regent Square, and I'm a member of the Pittsburgh Branch of Act Up, a political action group committed to defending the bodies of queer and transgender people in our community.

Last week, the Allegheny County Council passed a vital ordinance which seeks to solidify PREA protections. That's the Prison Rape Elimination Acts on a local level. This measure is especially important for transgender inmates who are often subject to sexual violence and denied timely access to healthcare while incarcerated. More specifically, trans people of color who are prime targets of the carceral system in this country are in need of protections given to the degree which they're subjected to

abuse.

Passing this ordinance is an important first step towards solidifying these protections, but it will mean very little if these protections aren't actually enforced by the jail, and to my knowledge, there's currently vague and limited information about the conditions of transgender inmates in the jail, as well as the access to healthcare that HIV-positive inmates have. So we need transparency about what's happening in both of these regards.

On the first point, if a transgender inmate is not housed with the proper population, i.e., according to their gender identity, they are at an unprecedented risk of being sexually abused. And to put it bluntly, it's not enough to simply sort of report data on sexual assault more broadly. We need to make sure that trans people are being placed properly.

Preventative measures must be taken to protect us from being placed in situations where we could be assaulted in the first place. That's the idea, and if you don't, like, believe me on this, I would refer to the Jules Williams

lawsuit against the jail.

On the second point about HIV, there has been accusations and concerns about the jail in the past, going back to at least 2015, with HIV or individuals with HIV either not getting access to medications or timelines being not super, I guess, speedy.

Given Trump's attack on the funding for HIV right now, people in my community are frankly just waiting for another massacre to happen. So establishing and monitoring any protective measures in high-risk environments like the jail right now is really nonnegotiable for us because these measures save lives and protect us.

It also seems unclear whether or not transgender inmates are getting access to gender-affirming healthcare. In 2022, it was reported that a trans man by the name of Keyshawn Pennybaker was not receiving his hormones in a timely manner, nor receiving adequate care for a mastectomy he received prior to being incarcerated. When he finally met with one provider, he was informed that the medical staff at ACJ don't know how to treat LGBT people, so my

question now is --

JUDGE EVASHAVIK-DILUCENTE: Your time is up, ma'am.

MX. FITZGERALD: If you don't or push for transparency on these matters, the people in my community will know. Yeah, and silence is complacency in an ongoing assault of our body --

JUDGE EVASHAVIK-DILUCENTE: Thank you. Nathan Hoye.

MR. HOYE: How is everyone doing this evening? My name is Nathan Roshawn Hoye. I just want to make an announcement to Mr. Matthew Sloan at Renewal Center and medical nurse Danielle Hawks and Ms. Anna Marie and Mr. Dave, who is very good staff members at Renewal Center.

I also want to bring to the Board's attention they should have two corrections officers on each pod due to the violence and the negativity, and the guards should wear mace at all times to protect theirself (sic) and also make sure no inmates die in the Allegheny County Jail, and make sure medical help all inmates, makes sure their mail isn't being tampered with, make sure they're not being abused in solitary

confinement, make sure everyone is getting their treatment that they need and being treated with respect, and that they're able to call home to their families, and just watch over the inmates in the Allegheny County Jail.

Thank you.

MS. HALLAM: Thank you.

JUDGE EVASHAVIK-DILUCENTE: Thank you.

John Kenstowicz.

MR. KENSTOWICZ: The murder of Tyrone Good, a sentinel event. Jail murders of one resident killing another very seldom happens. When they do happen, it is a sentinel event requiring a reexamination of security measures, training, staffing patterns, and the relationship between our officers, administration and our residents.

Concerning the sentinel event of Tyrone Good being killed, what does this say about our jail administration and our Jail Oversight Board from our correctional officers' perspective? Based on our correctional officer survey and many conversations with correctional officers, our officers believe the Board's

actions and our new jail administration policies have made our jail unsafe. Resident assaults on residents have significantly increased, and resident assaults on officers have also significantly increased. The statistics are compelling, comparing 2024 and 2025; 285 resident assaults on residents in 2024, 417 in 2025. And 105 resident assaults on officers in 2024 and 163 in 2025.

Officers believe care, custody, and control. The mantra of correctional institutions are no longer part of what happens in our jail, but as many correctional officers have said, the inmates run our jail. Our officers have recognized a dramatic decrease in searches of residents' cells for weapons and contraband. The metal or glass of the tablets can and are being made into weapons.

There was an incident recently at the jail where 6 razors were out to residents, and only 5 were returned. Frontline staff were adamant about the need to conduct a search of the block to find this razor, but the shift commander refused. This significantly affected the morale of our officers who were aware of the refusal.

Put yourself in our officers' shoes and imagine going into the block knowing that one resident very possibly has use of a razor that could be used to attack someone else or hurt themselves. Though my antagonists will doubt this statement, there are some residents who want searches to be done so weapons and drugs will be found, which will make them safer.

Howard v Williams has created some positive changes, but the pendulum has swung too far the other way. Officers feel left out regarding the security measures concerning healthcare and movement --

MS. HALLAM: Times up.

JUDGE EVASHAVIK-DILUCENTE: Thank you.

Perlina Story. Is Perlina Story here?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Karen Burns.

MS. BURNS: Good afternoon. My name is Karen Burns Ritigliano, and I am a member of the Pennsylvania Interfaith Impact Network. PIIN is deeply concerned about the systemic

issues surrounding the Tyrone Good murder on May 13th, and while we acknowledge the deep progress made under Warden Wingard, this heinous crime underscores that additional safeguards are urgently needed to protect all Allegheny County Jail incarcerants.

You must focus specifically on further segregating inmates based in endangerment circumstances. What policy safeguards will additionally be enacted to improve basic safety? And one of our society's fundamental responsibilities to those behind bars is their protection from violent crime. ACJ must do better.

Furthermore, witnessing a multi-assailant murder case causes horrific lasting trauma, and while we've spoken about it just now, it is so very important that you are following up with counseling to be provided, and we appreciate that.

Incarcerant safety is directly tied to the significant staffing shortage at ACJ. Fulfilling the 26 staffing target of 480 to 500 correction officers with 413 currently on staff, still is a serious shortfall of 15 to 20 percent.

Without sacrificing screening standards, the jail should examine a new and adapt a competitive compensation, scheduling and training strategies used by other ACJ-sized facilities to improve the recruitment rates of correction officers.

However, the elephant in the room is decarceration tactics. The ACJ population was approximately 1,600 in April of '26, and it's not very significantly less very much in April -- since April of '25. The ACJ population is not declining, even though six months ago, in December of '25, the court introduced several promising case processing changes intended to reduce jail population and shorten stays.

Our questions are, how are those changes varying in implementation, and are there removable barriers to achieve the impact the court envisioned? What else can be done to achieve the decarceration improvement envisioned by the Wingard administration, the court, the County Executive Innamorato, and the dedicated Jail Oversight Board?

We expect more from this brain trust, and the thought partners that you are

indeed. We implore and expect the Jail Oversight Board to continually investigate every aspect of ACJ operations as your mandate requires. We implore the court to build upon your tactics envisioned and implemented while safeguarding incarcerant mental health and well-being. Thank you.

JUDGE EVASHAVIK-DILUCENTE: Thank you.

Diana Hull.

MS. HULL: Diana Hull, from the Pennsylvania Interfaith Impact Network. The reason that designated family point of contact or an attorney must be notified is simple. Families know the personal medical history when somebody arrives at the hospital -- the emergency -- at the emergency department, and the physician has no access to that history. It can delay care, complicate treatment, and in some cases, puts the person's life at risk.

At the Allegheny County Jail, of the 1,600-plus residents, there are typically between 1,000 to 1,200 of them awaiting trial or simply there because of detainer technicalities.

Families also lose the time with

the seriously ill family member. Sometimes, some of them have been deprived of the chance to be present in a person's final moments. As a former nurse, I find it unfathomable that notification is treated as casual or optional.

Last April, a vote to begin addressing this issue was delayed due to concerns raised by the Sheriff about possible escapes, but this Board is not responsible for the Sheriff's operations. Your responsibility is for the oversight of the jail administration and for the care of the residents that are there.

Hospitals already have security procedures in place. That concern should not be used as a reason to delay a policy that protects lives. The public was told in April that a vote would occur by the June meeting. Yet, here we are, months later with no action taken. It is extremely disappointing.

I urge this Board to work quickly and collaborate with the jail administration to develop a clear notification policy. The designated point of contact and the person's attorney must be notified any time an incarcerated individual is sent to the hospital.

Their life may depend upon it.

Thank you.

JUDGE EVASHAVIK-DILUCENTE: Samantha Fitzgerald. Oh, sorry.

Joe Shaughnessy.

MR. SHAUGHNESSY: Good evening. I'm Joe Shaughnessy from PIIN. Last month, Reverend Kay Walker, the Pastor from the First Unitarian Church in Shadyside, commented that in her previous experience in a hospital setting, that it was actual standard procedure to notify the next of kin of inmates when they are hospitalized.

I'm curious why such a standard in another setting and so unfathomable -- is so unfathomable in Pittsburgh. If it's a financial consideration and a strain on personnel, that means corrections officers, Sheriff's officers, cash money, why are we not looking more closely at ways to reduce the workload, by which I mean the numbers of the incarcerated folks at the ACJ?

Especially during a time we can see an alarming increase, maybe not that alarming, in the population, despite the efforts of the judges and others to hold more retainer hearings in

order to expedite the release of people who don't need to be in the jail. We know that people cannot exist merely on their own. We all need community to survive when we are sick or weak or otherwise compromised. Even the strongest and most fortunate people suffer physical and mental setbacks. Suffering is a part of life. But those without connects to their whole self are at a distinctive disadvantage.

So what I'm hearing is that to go into the ACJ as a CO or an inmate could be a death sentence or an abbreviated lifespan, and there's little or nothing that can be done. Maybe it's possible that implementing a consistent policy and practice of calling family friends listed in any given patients' file is just the cost of doing business. If there are no resources, then perhaps you have to change your business practices or close the business.

JUDGE EVASHAVIK-DILUCENTE: Sharon Bonavoglia.

MS. BONAVOGLIA: A man was murdered inside the Allegheny County Jail on your watch and on your watch. We at the Pennsylvania Interfaith Impact Network demand that every

member of the Oversight Board do your job and watch the video footage. You are our eyes and ears for the public. You represent us, and you need to see that footage, especially because a CO was suspended without pay, which portends that CO's is probable culpability in the murder.

We have a couple questions that we hope you are addressing with jail administration. How have new COs been vetted? What changes need to be made in that process? We also firmly believe that this is a clarion call for decarceration. We keep hearing about staff shortages when the real problem is overpopulation.

The jail was able to successfully decarcerate to 1,000 residents during COVID, with the current 1,600 residents now. This is essential that it be happening now. And the two judges who sit on the Board have an ability in your very own courtrooms to help in this endeavor.

We at PIIN will continue to encourage that you also use your influence with your judicial colleagues to do the same. As President Judge, Judge Evashavik, you might want

to consider having all criminal court justices tour the jail to see the conditions under which they subject people. I do believe that everyone on the Board and in jail administration is horrified at the murder of Mr. Good, but that is not nearly enough.

We expect transparency with the public about policy changes that will ensure this does not happen again.

And now, if you are able, please rise for the reading of the names of the dead:

Richard Lenhart, Robert Blake, Cody Still, Daniel Pastorek, John Brady, Martin Bucek, Robert Harper, Vinckley Harris, Justin Brady, Paul Allen, Roger Millspaugh, Paul Spisak, Gerald Thomas, Jerry Lee Ross, Jr., Victor Joseph Zilinek, Ronald Andrus, Anthony Talotta, William Spencer, James Washington, Damon Leroy Kayes, Tim Manino, Douglas Bonomo, Zachary Sahm, Nicole Baruffi, Richard Sciubba, II, Terrance Clowney, Tracey Hickey, Justin McCullough, Nathan Piernik Mark Schwartz and --

JUDGE EVASHAVIK-DILUCENTE: Ross Tedder.

MS. BONAVOGLIA: -- Tyrone -- and Tyrone Good. Thank you.

MR. TEDDER: Good evening, y'all. My name is Ross Tedder. I work with the Alliance for Police Accountability.

I was here some months ago talking about the same thing I'll be talking about today, which is our notification policy around people who are incarcerated. I believe I asked a few questions last time of folks in the audience and of the Board.

How many folks have someone in a nursing home that they know that's close to them? How many folks have someone that is in a school, a public school that they know that's close to them? How would y'all feel if something happened to them and you weren't notified that they were moved to a hospital? It's rhetorical, but y'all get the point.

These people are no different than your own family members. You may not be related to them, but they're still a person who is in pre-trial detention, who deserves the rights of a person who is in pre-trial detention. Not allowing people, not notifying families when

their loved one has been moved to a hospital when they have a medical emergency is distressing, and it adds a whole other layer of torment that's involved with being the family of someone incarcerated.

So we have to change that. I know a motion was voted down in May over this. I am hereby asking y'all to figure that out and quick, because this is not okay. And if this was one of y'all's family members, y'all will understand that it's not okay.

Moving on to the second thing, right, which is the murder of Tyrone Good, right, I just want to say straight up, because I know that the public relations aspect of this, right -- folks immediately are going to jump to, well, do you know what he was accused of? And I'm going to say, I do, and it doesn't actually matter in this case.

This is a pre-trial detention center. People should be alive to be seen by a judge for them to make that determination of whether or not they committed that crime. Not murdered, not beat up, not whatever. And for the DA, our DA in Allegheny County, who has been here

since '99, before I was born, to come out and put in a memo, yeah, you know, these guys -- these corrections officers were probably involved in this. That's not good. That's a problem, because that's not the most quick to, you know -- he's not the most quick guy to put that stuff on record.

So it's important, right, that we're doing everything in our power to make sure that our jail acts as a pre-trial detention facility and not a place where people go to die.

So thank you. I yield my time.

JUDGE EVASHAVIK-DILUCENTE: Drew Thomas.

MR. THOMAS: Hello. My name is Drew Thomas. I come to you today to express the necessity of investigating CO conduct, of overhauling ACJ's medical release policy, and ultimately cutting the jail's currently unmanageably large population.

The tragedy that happened in ACJ last month brings the jail's inability to safely care for its number of incarcerated people to clear view. The population has been in recent memory as low as 1,100. We are at 1,600 today.

Over-incarceration is a petri dish for exactly what we saw last month at an industrial scale. The everyday violence hanging over life in this overpopulated jail, seeing the killing of Tyrone Good, creates a feedback loop of paranoia and violence felt by everyone in that building.

A university classmate of mine spoke to me in the spring about her father's incarceration in another northeastern prison system. Much like the majority of the inmates in the Allegheny County Jail, her dad hasn't been convicted of a crime, is being held pre-trial on a probation technicality, and had fallen victim to a series of violent medical incidents, also likely at the very least facilitated by corrections officers.

She told me my mom and I have to find out everything through him after he's had a brush with death, days after the fact. She told me, Drew, I don't know how to wake up every day and walk through life knowing that my dad could be dead right now and no one would tell me. She couldn't imagine how he did on the inside every day, months away from his next court appearance.

The environment of jails like her

dads, or that which we have in Allegheny County, from the isolation from loved ones on the outside to the spacial isolation and non-agency inside the jail, to lives hanging in the balance of corrections officers who seem giddy to see inmates be gravely injured, all of this results in a world where an incarcerated person and everyone who loves them spends every waking moment unsure if this will be their last day on earth.

People want answers about the process of vetting COs' qualifications and mental health. People want to see easier processes for signing updated medical forms, release forms, whatever. People want to see families and attorneys be notified about where and why inmates are being sent to the hospital, and most urgently, Allegheny County needs to see immediate and significant decarceration. I heed my time.

Thank you.

JUDGE EVASHAVIK-DILUCENTE: Tanisha Long.

MS. LONG: Coming to these Jail Oversight Board meetings for the past like five years, I notice things. One of the first things

I notice is the way that the Deputy Sheriff scooted out of here when the names of the dead were being read, even though he argued for his right to be here. It shows a priority.

I noticed how any time that there is a vote that will significantly improve the lives of incarcerated people and the well-being of their family members, that's when people show up to the meetings to vote. I notice how people argue for the interest of people this Jail Oversight Board is not built to argue for. We are not built to argue for the interest of the sheriffs. You are legally mandated to protect the interest of the people who work in the jail and the people who are incarcerated there. You are not a board meant to protect the interest of the sheriffs.

I've noticed that, you know, over the course of a few years, the death rate at the jail has lowered, and that was a direct -- that is directly correlated to our efforts here. And I will say that you have made great changes in that jail, Warden Wingard, but you have a cultural problem amongst your COs. It is a rot, and you have to remove it from its core. Not

enough changes have been made where we have COs who are being credibly accused of conspiring in the murder of an individual.

I also notice how Man-E and Bethany get blamed for a lot on this Board, how they're told they can't be trusted, but it wasn't them who leaked that letter to Collin Dunlap. So you can't trust your own Board, but they get treated like they're the problem here.

I've noted how family members have come to this Board many, many times to talk about the pain and their grief when it comes to not knowing what's happening with their loved ones, and that's not a primary concern. I've noticed how people we believe would advocate for us have let us down. This can't happen anymore.

I want to be an antagonist when it comes to issues of mistreatment and misconduct. I want to be an antagonist to people who argue for the rights of corrections officers who are complicit in the murder of individuals in this jail. And one thing I can say is if we start taking the smaller complaints that incarcerated individuals give seriously when it comes to their treatment by corrections officers, we won't get

to a situation where these corrections officers feel like they can get away with anything.

Thank you.

JUDGE EVASHAVIK-DILUCENTE: Tim Stephens. Tim Stephens.

MR. STEPHENS: Okay. Thank you, sir. Good afternoon.

As founder and CEO of the Black Political Empowerment Project, I'm speaking on behalf of the BPEP Planning Council. As one who has attended several Jail Oversight Board meetings over at least the last couple of years, if not longer, the issue of family members being properly informed of the status of their loved ones is still -- being ill or being hospitalized is still an issue.

It is far past the time to adopt and implement a policy that allows family members access to their loved ones when ill or hospitalized. I want each member of the Board to examine your hearts as to what you would want to have happen if your loved ones or loved one was housed in the Allegheny County Jail and became ill and/or was hospitalized. The incarcerated person's attorney should also be quickly informed

of any such situation involving their clients.

I request this Board move to immediately seek resolutions to the issues expressed by the Sheriff and the families. Area hospitals must be involved in the process to resolve the existing problems currently preventing the adoption and implementation of a workable policy for all.

When one's loved one is incarcerated in the Allegheny County Jail, they expect the staff of this jail to protect their loved ones from physical and/or psychological abuse of officers and of fellow incarcerated individuals. Most family members and friends of those incarcerated are already concerned about their loved ones being incarcerated.

They certainly should not fear for the death of their loved ones while in the custody of this county jail. The murder of Tyrone Good while in that custody certainly brings up questions as to what protections and policies are in place to prevent such a tragedy from ever happening again. A person who is incarcerated in the Allegheny County Jail is not to be in any way subjected to a literal death

sentence. BPEP is requesting that this county jail and its oversight board move to fully review existing policies and procedures and would fully vet potential new employees to help ensure that the county is implementing -- or employing only individuals who have a full respect for the law and a commitment for the protection of each incarcerated citizen, and a sensitivity about each incarcerated individual should be treated by those charged with the care of each incarcerated person.

It's imperative that policies and procedures be put into effect as quickly as possible to ensure that people who have connections to persons impacted by the same case or have noted preexisting conflicts or fights with individuals not be assigned to the same pod. The suggestion policy is a must and should be implemented expeditiously.

There should also be an investigation implemented by the Jail Oversight Board --

JUDGE EVASHAVIK-DILUCENTE: Sir, your time is up. I'm sorry.

MR. STEPHENS: -- to fully

investigate if and how any officers at the Allegheny County Jail --

JUDGE EVASHAVIK-DILUCENTE: Jodi Lincoln.

MR. STEPHENS: -- may in any way encourage conflict between those incarcerated. Thank you very much.

JUDGE EVASHAVIK-DILUCENTE: Jodi Lincoln.

MS. LINCOLN: Hi. Jodi Lincoln. I'm also here to speak on updating the family notification policy. For those of you who are new to the Board, you might not know this, but this has been an issue raised over and over and over again for years.

We have continuously had public comments from family members sharing their horror stories of not knowing a loved one was in the hospital for weeks, or undergoing high-risk medical procedures until after they returned to the jail and finally able to contact their family directly again.

Imagine you have a loved one at the jail who you have regular daily communication with and then all of a sudden, they just stop

contacting you, and efforts to find out their whereabouts get sidelined, and you are given the run-around. Eventually you might find out that they've been in the hospital for days, weeks, possibly in a life-threatening situation, and you still can't talk to them or go and visit them. I get worked up and upset about even thinking about that happening to me and my loved ones or friends and family.

The arguments for why a Family Notification Policy is not only essential for the health and well-being of the people in the hospital, and the trauma and pain the current system causes family members have been outlined time and time again, so I'll refrain from diving into those.

I want to focus on how this policy, though, is really about treating people with the care and respect they fundamentally deserve as fellow human beings. People in the jail are already in an extremely vulnerable position, and adding hospitalization on top of that can be extremely overwhelming and a traumatic experience. Don't we all want the support of our loved ones when we are going through a health

crisis or in the hospital? Just because someone is incarcerated doesn't mean they don't deserve the dignity and care while experiencing a medical emergency.

One of the beautiful things about humanity is how we support and care for each other when we are sick, and the healing power of love and kindness. The arguments against establishing a policy that notifies families and attorneys when an incarcerated person is sent to the hospital just don't pass the sniff test.

Families and attorneys should be notified. We should be encouraging loved ones to be able to visit their family in the hospital instead of putting up barriers. Medical release forms should be a part of Intake for everyone. These are no-brainers.

Jail leadership and this Board have come a long way in the past year, but this lingering issue needs to be resolved ASAP. It's simple human decency.

Thank you.

JUDGE EVASHAVIK-DILUCENTE: HP Jackson.

MR. JACKSON: Well, good evening.

My name is HP Jackson, Black Political Empowerment Project. I grew up with NAACP all my life in Pittsburgh, you know. I'm not pointing my finger at you, Warden, you know. I mean, these problems and issues have been going on for about 20 years or more. It's the thing that families, the communities done unified and paid attention about life.

You know, life is valuable, and we don't have no reasons to -- oh, boy, you know, to run in jail to be locked up and expect to be comforted. That's number one because jail is a facility. You know, I'm disappointed about the losses that we've done had with inmates being in jail, but we got to in and accept the reality that, like, we have to do something better in order to connect, in order to go ahead and help humanity, period.

You know, life is valuable, and we make bad choices, and we get locked up. You know, and then we're rallying and everything, you know, to go ahead to make everything better, but jail is not a comfort zone. And that's the reality. But we need to pay attention to the inmates that's been sick and handicapped,

innocent and locked up.

In the meantime, I hope things get better, I really do, because the complaints and the heartfelt names and people that's done mention about inmates being locked up, I was one of those people who got locked up also. Not one time, but quite a few times, you know. And jail, it's not a place -- pleasant place to be locked up in. And I'll leave with that, but I hope everything gets better for the future, for our younger people, and the younger generation, because we really do have a problem.

Thank you.

MS. HALLAM: Thank you.

JUDGE EVASHAVIK-DILUCENTE: Aidi Tilley.

MS. TILLEY: Aidi.

JUDGE EVASHAVIK-DILUCENTE: Aidi Tilley. I'm sorry. Aidi Tilley.

MS. TILLEY: It's a moral failure for the jail to use the excuse of their utter incompetence to handle security concerns for not presenting an exceptional policy that notifies family and their loved ones that are experiencing a medical emergency. No one should wait or find

out through rumors that their person is extremely injured while incarcerated. It's inhumane and cruel to put anyone in that position.

Time is critical during medical emergencies. The golden hour is the first 60-minute window where someone has the highest chance of survival from a traumatic injury if they receive appropriate care. It's vital that families are alerted as soon as possible and have a system to easily share medical information that can save their loved one's life.

We ask that a policy is created that notifies family, Jail Oversight Board Members, and attorneys immediately when someone is taken to the hospital, and no one should be deprived of being with their loved ones in their final moments.

Families and attorneys should have the right to visit them. No more debates. No more discussions and no more continued votes. You are all responsible for the well-being of the incarcerated population, and to actively decarcerate the Allegheny County Jail. So what are you all going to do about it to fix this today?

JUDGE EVASHAVIK-DILUCENTE: Roy Blankenship.

MR. BLANKENSHIP: How are you doing, all? My name is Roy Blankenship, Community Organizer, with BPEP, the Black Political Empowerment Project.

I want to start out by saying thank you for hearing me. I wish I would have had time to get a little bit better dressed, but Warden, I'm going to say that I have seen changes, and the administration making efforts to do work with the county jail, but we are alarmed, right?

I was sitting here listening to all the people. I want to thank all the advocates that came to speak up. There is work to be done, and I believe from a community standpoint -- Bethany and Man-E, I thank you guys for always keeping up the fight.

But what I was wondering -- how I would say what I was saying, and what I would say -- I have things written down -- but I just quickly used AI, right? And on there I just asked the question, you know. The question was, what does -- what is the duty of this Board, okay? And on that AI, it says your duty was to

be a non-bias entity that would service the people of Allegheny County. Now that's on both sides. And there's a failure in that.

Under my constitutional rights, I invoke that this Board acts amongst its proposed duties, because any type of bias or rulings that happens is a violation, and your job is in jeopardy.

Also, just a quick comment before I leave, that time, I understand that we have to do things in a timely fashion, but just like my pastor told me in church, sometimes when you rush things up, you miss the miracle.

So thank you.

JUDGE EVASHAVIK-DILUCENTE: Cory Roma.

MR. ROMA: Cory Roma, and I'm here to discuss two subjects. First, I will once again call upon this Board to explore in detail and adopt a comprehensive and compassionate policy for family notifications of hospital visits.

I have taken time to listen to opposing arguments and hear all those, and on the Board who objected to pursuing a new policy. But

I quite frankly don't think any of the points that have been raised are a legitimate concern to have to block this measure.

How many times do you have to have -- how do you have to be presented with family members sharing their trauma and not knowing about their loved ones before you feel compelled to act? The intransigence of some members of this Board toward action is disgraceful. Please stop deferring or making excuses and finally do something on this.

And second, I am joining with other community members who are here today to demand answers and accountability from both the JOB and jail administration over the recent murder of Tyrone Good while he was incarcerated at the ACJ. The jail has seen so many avoidable and senseless deaths over the years, and it is particularly alarming that a seemingly coordinated murder happened despite the safeguards that are supposed to be in place to prevent such violence.

Anyone awaiting trial in the ACJ is a human being. They have their right to their day in court, and until that day happens, it is your responsibility to make sure that they are

safe and okay. This tragedy deserves a full investigation of both the incident itself, and every person involved, including determination and prosecution of any correctional officer or jail employee that conspired in this event. Tyrone's family deserves answers and closure, and the public deserves answers as well.

JUDGE EVASHAVIK-DILUCENTE: Kasey Brown.

MS. BROWN: Hello. My name is Kasey with the Party for Socialism and Liberation. I'm here to speak about the murder of Tyrone Good. I would like to start by saying that nobody deserves to be murdered in jail, regardless of the crime that they committed to get there. No inmate, no guard, should be judge, jury and executioner. That is what the trial they are awaiting is for.

Next, we know that the guards failed to intervene in this situation, and it appears that they played some role in the murder. We demand a transparent, publicly available investigation into this incident.

This situation points to an all too familiar prison culture. We know that people

feel isolated and lonely in the jail. These feelings make violence more likely. Violence between inmates is also used and encouraged and sanctioned by guards as a form of social control to disrupt bonds between inmates. How is this culture being addressed? Is there a plan to adequately vet our guards?

Lastly, the jail is suited to hold 1,100 people but currently has 15 -- 1,600. To the judges, what is your plan to decarcerate these people? Are you planning to bring people around the jail to show them the conditions that you are plunging them in?

Finally, I would like to echo something which was mentioned earlier, which is I want to know what resources are available to our transgender incarcerated inmates. I want to know their access to healthcare.

I want to know your plan for the prevention of violence, and I would also like to mention that this culture where violence is sanctioned between inmates for social control is also put upon transgender women who are 13 times more likely to be assaulted sexually than their cisgender male counterparts when placed inside of

male detention cells.

Thank you.

MS. HALLAM: Thank you.

JUDGE EVASHAVIK-DILUCENTE: Terry McClay?

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Clay Copaway? Clay, Cray, Copaway.

(No response.)

JUDGE EVASHAVIK-DILUCENTE: Caelum Burns.

MR. BURNS: Good evening, Board. I'm Caelum Burns. I'm with the Global Switchboard. In light of the conversations surrounding the Hospital Notification Policy and the security concerns that this Board has raised, I would like to take a moment to read out this Board's stated duties. Namely, these include the oversight of the health and safekeeping of incarcerated individuals.

Nowhere did these duties include the oversight of the health and safekeeping of the Allegheny County Sheriff or his office. Beyond a resounding absence of historical evidence that indicates that notifying

incarcerated individuals loved ones of their hospitalization would put the Sheriff or others at risk, this consideration clearly falls beyond the scope of this Board.

On the other hand, preventing family members who may be able to provide doctors with crucial medical information about incarcerated patients, from even knowing that their loved ones have been hospitalized is without a doubt a deliberate and preventable threat to incarcerated individuals' health.

In regard to these people's safekeeping, I'm sure I don't have to remind this Board that the 6th Amendment guarantees the constitutional right to an attorney. Preventing incarcerated individuals' legal representation from accessing them during times of medical duress is a disturbing violation of this principle and one that cannot be ignored.

The fact that the jail's current policy threatens not one but two of the most important rights that this Board seeks to protect for incarcerated individuals means that action cannot be delayed any further. For this reason, I am asking the Board to enact a new Hospital

Notification Policy that notifies the families, the Board, and attorneys when any incarcerated person is sent to the hospital for any reason, and where exactly they are sent. This policy must be passed immediately, less the Board fail in its fundamental purpose.

More than this, I implore the Board to remember your humanity. It is vitally important to imagine yourself as the parent, spouse, or child of an incarcerated person and the unbearable pain that inevitably comes from not only being -- not being with your loved one during their final moments but not even being aware of this situation.

It is equally, if not more important, to imagine yourself as an incarcerated person dying scared and alone with no one to hear your final wishes and goodbyes.

The way this Board has approached this conversation to date reveals a disturbing "us versus them" mindset. To return to your duties, it is not possible to protect the health and safekeeping of incarcerated individuals if you continue viewing them as the enemy, unworthy of the dignity that every person deserves when it

comes to their wellbeing.

Thank you.

JUDGE EVASHAVIK-DILUCENTE: Frank Filkosky.

MR. FILKOSKY: I, like many others, have come here to talk about the Hospital Notification Policy as well as the murder of Tyrone Good. But I wanted to first start with the golden rule. Our Warden here, at the recent graduation of 15 new correctional officers said, and I quote, "Remember, most of those who are incarcerated here will return to our community, so treat everybody like you would want to be treated, or like you would want a member of your family to be treated.

I say again, or like you would want a member of your family to be treated." Like many others have said here today, what would you do -- not what would you think, what would you do if a close family member of yours was in the hospital and you had to hear from a neighbor or a friend after the fact.

Too long in America has law enforcement policy been able to reference ghosts to get more funding and things done, or more

importantly, to block things. Security concerns, administrative concerns.

104 million, 114 million, 122 million, the last three budgets of the Allegheny County Jail increasing almost 10 percent year on year. None of us have seen a 10 percent increase in our money year on year. Like another speaker said, if the money is there, make it happen. It's your job to figure it out.

We are asking for a policy that notifies the family, the attorney, and the Jail Oversight Board whenever any incarcerated person is sent to the hospital. It is only what you would ask of your own family members. It's only what you would expect, the golden rule.

Loved ones and attorneys should be able to visit the incarcerated person in the hospital, again, the golden rule, thank you, Warden. The jail needs to update and streamline the process for updating medical release information. Again, this is just simple human dignity that others have talked about.

Where is all the extra money going? We complain about administrative concerns. Find the time, find the ability. You have the

resources.

To the murder of Tyrone Good, I ask questions now because we're under investigation and we can't share things. Will there be transparency from the jail when the investigation is completed? Full transparency.

Will we be made known of the possible relationships, possible, between the correctional officer -- correctional officers and the murder of Tyrone Good and their involvement? How will the ACJ address a culture where their COs steal from those that are under lock and key and at their mercy?

How will the ACJ address a culture where COs encourage violence, sanctioned violence, sanctioned fights, and potentially sanctioned murder.

And what will you on this Board do? Go to the jail, watch the video. Do your mandated visits and do your job.

Thank you.

ADJOURNMENT

JUDGE EVASHAVIK-DILUCENTE: Do I have a Motion to adjourn?

MS. GRIFFIN: So moved.

JUDGE EVASHAVIK-DILUCENTE: Second?

JUDGE DELUCA: Second.

JUDGE EVASHAVIK-DILUCENTE: All in favor?

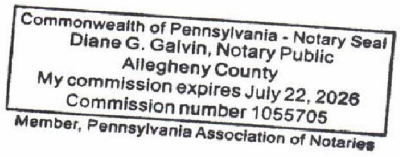
(Chorus of ayes.)

(Whereupon, the hearing was concluded at 5:53 p.m.)

C E R T I F I C A T E

I hereby certify that the proceedings and evidence are contained fully and accurately to the best of my ability in the notes taken by me via an audio recording of the within cause and that this is a true and correct transcript of the same.

Diane G. Galvin
Notary Public



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JAIL OVERSIGHT BOARD ACTION TRACKER					
File No.	**Date**	**Type**	**Status**	**Vote Information**	**Details**
2024-080	6/4/2026	Motion	Passed (9-0)	Yays (unanimous)	Motion: to approve the meeting minutes for May 7, 2026